



WESTERN
WASHINGTON UNIVERSITY

**Western Washington University
Public Records Office
516 High St.
MS 1420B
Bellingham, WA 98225 – 9103
Phone: (360) 650- 2728
FAX: (360) 650- 4228**

Public Records Request

IDENTIFICATION		
Name	Date of Request	
Street Address	Phone	FAX
City / State / Zip	Representing	
Records to be: _____ Viewed _____ Copied		
The University charges 15¢ per page for standard copies. There is no charge for viewing records.		

NATURE OF REQUEST

Description of Records – Please give a written description of the records you wish to see and, where possible, indicate dates, topic, and person(s) referenced. Please be as specific as possible.

I hereby certify that the information obtained as a result of this request for public records will not be used in whole or in part to compile a list for commercial purposes. **(RCW 42.56.070)**

Requester's Signature: _____

OFFICE USE ONLY		
<u>Date Request Received</u>	<u>Request Number</u>	
Request Referred to: <u>Name / Department</u>		<u>Date Sent</u>
1. _____	_____	
2. _____	_____	
3. _____	_____	
<input type="radio"/> REQUEST APPROVED	Date: _____	By: _____
<input type="radio"/> REQUEST DENIED	Date: _____	By: _____
Reasons for Denial:		
REQUEST CLOSED / DATE:		